




Supporting Pupils with Medical Conditions and the Administration of Medication Policy

Policy Reviewed	September 2023
Next review	September 2024
Shared with Governors	September 2023
Signature of Chair of Governors	Signature of Headteacher
Matt Dunkin	Jill Cromey 

At Stubbins Primary School, we strive to create a supportive and inclusive environment where learners are encouraged to explore their passions; develop their talents; and achieve their full potential.

Through effective learning experiences, we foster a life-long love of learning, empowering learners to become critical thinkers, problem solvers and compassionate individuals.

By providing a strong foundation of knowledge, skills and values, we are dedicated to preparing our learners for success in an ever-evolving world. Together, as a vibrant community of learners, we nurture, grow and flourish.

NURTURE-GROW-FLOURISH

Stubbins Primary School is an inclusive community that welcomes and supports pupils with medical conditions. We provide all pupils with any medical condition the same opportunities as others at school.

Policy Statement

There is no legal or contractual duty on school staff to administer medicine or to supervise a pupil taking it. This is a voluntary role and is recognised as such by the DfE.

While teachers have a general legal duty of care to their pupils, this does not extend to a requirement to routinely administer medicines. However, schools are required to ensure that policies and procedures are in place to support pupils who have medical conditions in order that they do not miss out on their education unnecessarily.

The Governors will fully support any members of staff who do not wish to administer medicines or who feel that they are being unfairly pressurised to do so. When authorizing the administration of medication, senior staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, where one exists.

However, some practice is deemed as unacceptable in all circumstances including:

- preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assuming that every child with the same condition requires the same treatment;
- ignoring the views of the child or their parents; or ignoring medical evidence or opinion, (although this may be challenged);
- sending children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable;
- penalising children for their attendance record if their absences are related to their medical condition eg hospital appointments;
- preventing pupils from drinking, eating or taking toilet or other breaks whenever

- they need to in order to manage their medical condition effectively;
- requiring parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
 - preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

Staff who do volunteer to administer any medicines should not agree to do so without first receiving full and detailed information and training. The appropriate school forms must be filled in by parents and signed by a senior member of staff with the parent present to answer any questions staff may have based on the form.

The local NHS Trust or Health Authority is able to advise schools on the source of the support required. In many areas this support will be provided through the School Health Service. In accordance with the National Service Framework for Children, Young People and Maternity Services, all schools and educational settings have access to training provided by health professionals on all medical conditions. The relationship between all agencies including school, health professionals and parents is essential to provide effective support for a child with medical needs. It should not be the sole responsibility of the school to facilitate medical support. Further details on this can be found in the roles and responsibilities section (Pg 11:20) of the 'Supporting Pupils with medical conditions' document. DfE April 2014.

Guidance on which medication may be administered

Parents are responsible for their child's medication and children who are genuinely unwell should not attend school. The Headteacher is however, responsible for deciding whether the school can assist a pupil who needs medication during the school day.

Only prescribed medicines should be brought into school. Non-prescription remedies such as Calpol, Paracetamol, cough or throat lozenges or any herbal remedies, generally should not be in school unless they are accompanied by a doctor's note.

These may however be administered by parents, if they wish to come in to school. An appropriate time should be arranged for this to occur.

In the case of antibiotics, these will only be administered if they need to be taken 4 times a day, unless there is a specific requirement for these to be linked to meals or other similar circumstances.

Staff will not routinely administer eye drops but this may be permitted with express permission of the Headteacher if particular circumstances require so. Where possible, older children, with permission of adults may administer eye drops in some circumstances e.g. for hayfever, under the supervision of an adult.

Sun screen or creams should be self applied by children. This activity can be supervised by an adult. In the case of very young children it may be necessary for staff to apply Sun Cream with parental permission.

Authorising and Recording Medicine Given

Any parent requesting medication administration should be directed to the school office. Parents will be asked to complete a medication administration consent form with details of the medication, any side effects and the required dosage. Once completed these are signed by a senior member of staff who may ask questions and add any further detail to the form in conjunction with the parent. Once completed the medication is stored and the form handed to the member of staff administering the medication.

In addition to a signed copy of the medication administration form, staff administering medication, should also complete the record of medication administered which is printed on the reverse of the form. Copies of these records should be returned to and securely stored in the office once medication has been administered. The record of administering medication is evidence for staff that they gave the medication to the child and did so following the prescribed amount, should that ever be in question.

Storage of Medication

The Headteacher is responsible for ensuring the safe storage of medicines. Where two or more medicines are required by a particular child, each should be kept in a separate container.

Schools should not store large volumes of medication. As far as is practical, the smallest possible dose of medicine should be brought into school. Doses of liquid medicines should not, however, be transferred from the original bottle as this would result in the loss of some of the medicine on the sides of the bottle. Medication should be stored strictly in accordance with product instructions, taking particular account of the correct storage temperature. Pupils should know where their own medication is stored and how to obtain it.

Medicines should be stored in their original containers, clearly labelled with the name of the pupil, the name and dose of the drug, the frequency of administration, and any likely side effects, and the expiry date. Parents are responsible for ensuring that this information is provided.

Medicines should - subject to the exceptions below - be stored in a secure place such as the staff room.

Some medicines, such as asthma inhalers and Epi pens, must be readily available to pupils and must be kept close by (but out of reach in the case of Epi pens). Children who are capable of carrying or storing their own inhalers may be allowed to do so, following consultation between parents and the Headteacher. This should be outlined on the pupils' Healthcare Plan.

Schools should not continue to store surplus or out-of-date medicines. Parents should be asked to collect the containers for delivery back to the chemist, and should routinely collect medicines held by the school at the end of each term, unless expressed differently on a IHP. At the end of each academic year, medicines should be sent home and where needed a new supply should be sent the following September.

Sharps boxes (obtained by parents on prescription) should always be used for the

disposal of needles.

“The employer must ensure that health risks arising from medicines are properly controlled, in line with the Control of Substances Hazardous to Health Regulations 2002.” (COSHH).

Long Term Medication

Many pupils with long term medical conditions will not require medication during school hours. The Governors recognise that it is desirable for children with long term recurring health problems, such as asthma, epilepsy, diabetes and eczema, to be accommodated within school in order that they can continue their education.

For this to be done, however, proper and clearly understood arrangements for administration of medicines must be made and an individual healthcare plan filled in by parents and staff. In some cases this may also involve advice and input from specialists such as epilepsy nurses. This document will clearly outline which medicines are required, when to administer, the required dosage and what to do in the event of a medical emergency. The staff completing the plan and the parent should both sign the document to show that this is a true record of requirements. A copy is then kept in the class file and also centrally in the Health and Safety file. Where medication such as inhalers are administered but there is no emergency, staff will inform parents routinely at the end of the day.

Parents should be encouraged to provide maximum support and assistance in helping the school accommodate the pupil. This would include measures such as self administration (where necessary and only after approval from a GP) or parental supervision.

Administering Medication

If in doubt about any procedure staff should not administer the medicines but check with the parents or a health professional before taking further action.

Staff should be particularly wary about agreeing to administer medicines to pupils where

the timing of its administration is crucial to the health of the child; or where some technical or medical knowledge is required; or where intimate contact with the pupil is necessary (this would include administration of rectal Valium, assistance with catheters or use of equipment for children with tracheotomies). In such situations, an 'Intimate Care Plan' should be developed.

The administering of medicine such as this would only be agreed after joint consultation with parents, staff and medical experts.

Any member of staff who is prepared to administer medicines such as this should only do so under strictly controlled guidelines, fully confident that the administration will be safe. Every reasonable precaution must be taken. Clear instructions about medicines requiring regular administration must be obtained and strictly followed.

Note – Department of Health guidelines state that it is not safe practice for staff managing medicines to follow re-labelled/re-written instructions or to receive and use repackaged medicines other than as originally dispensed with clear labels for their administration.

Emergency Situations

In cases of accident and emergency, staff must, of course, always be prepared to help as they, and other school staff in charge of pupils, have their general legal duty of care to act as any reasonably prudent parent would. In such emergencies, however, teachers should do no more than is obviously necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm. Qualified medical treatment should be secured in emergencies at the earliest opportunity.

Individual healthcare plans for pupils with specific needs contain details of what constitute would and emergency for that child as this may vary. All staff working with pupils with individual health care plans are aware of the details contained within them and have continuous access to this document.

Educational visits

As with all medication, medication should be handed to staff and a medicine administration form completed and signed by a senior member of staff.

If medication is required while on the school trip, for example insulin, then supplementary to the healthcare plan, provision of such should be recorded as part of the general risk assessment for the educational visit.

Adrenaline Pens (epi-pens) must be stored in a secure but accessible place close to the child's immediate environment. In the event of any administration of emergency medication, the Headteacher and parents must be notified immediately.

Staff Medicines

Members of staff may need to bring their own medication into school. This should be safely locked away. It does not need to be stored with pupils' medicines, but must not be kept in classrooms or in any area to which pupils have access. If possible all medicine should be locked away.

Although information about required medications may be considered as confidential, it may be necessary to inform other members of staff on how to administer medication if required. This may be relevant to medication such as epi-pens which an individual may be unable to self-administer in an emergency.

Concerns over staff needing to take medication in school should be discussed with the Senior Leadership team.

Relevant Policies

Also see:-

First Aid Policy

Health and Safety Policy

Educational visits policy

Intimate care policy